APPLICATION DATA SHEET FORM

Inventor Information

Inventor One Given Name::

Family Name::

Postal Address Line One::

City::

State or Province::

Country::

Postal or Zip Code::

City of Residence::

State or Province of Residence:: Country of Residence::

Citizenship Country::

Suketu P.

SANGHVI 1 Hancock Drive

Kendall Park

N.J **USA**

08824

Kendall Park

NJ USA Canada

Inventor Two Given Name::

Family Name::

Postal Address Line One::

City::

State or Province::

Country::

Postal or Zip Code:: City of Residence::

State or Province of Residence::

Country of Residence::

Citizenship Country::

Inventor Three Given Name::

Family Name::

Postal Address Line One:: City::

State or Province::

Country::

Postal or Zip Code:: City of Residence::

State or Province of Residence:: Country of Residence:: Citizenship Country::

Thomas A.

BOYD

279 River Road

Grandview

NY **USA** 10960

Grandview

NY **USA**

United States of America

Paul J.

Maddon 191 Fox Meadow Road

Scarsdale NY

USA 10583 Scarsdale

NY **USA**

USA

Application Data Sheet Form

Correspondence Information

Name Line One::

Edward R. Gates

Name Line Two::

Wolf, Greenfield & Sacks, P.C.

Address Line One:

600 Atlantic Avenue

City::

State or Province:: Country::

MA U.S.A.

Postal or Zip Code::

02210

Boston

Telephone One:: Telephone Two::

(617) 720-3500 (617) 646-8232

Fax Number:

(617) 720-2441

Electronic Mail::

egates@wolfgreenfield.com

Application Information

Title Line One::

COMBINATION THERAPY FOR CONSTIPATION

Total Drawing Sheets::

1

Formal Drawings?::

No 114

Claims:: Application Type::

Utility

Docket Number::

P0453.70116US01

Representative Information

Representative Customer Number::

23628

Continuity Information

This application is a:: Non-Provisional Patent Application

claiming benefit from

>Application One::

60/461,585

Filing Date::

April 8, 2003

Patent Number::

n/a